

SUBSTANCE ABUSE AGENCY MODEL (SAAM)

Fee For Service Reports

Q3 CY 2014

1. Providers Enrolled
2. Active Providers
3. Claims
4. Denials
5. Procedures
6. Diagnoses
7. Aid Category
8. Demographics

Substance Abuse Agency Model (SAAM) Fee for Service Reports

Time Period: Incurred With Runoff Quarter				QTR 3 2014
Provider Type NV Code	Provider Specialty NV Cd	Provider County	Provider ID and Name	Providers Enrolled
017	215	Carson City	100535028 CARSON CITY COMMUNITY COUNSELING CENTER	1
		Churchill	100535036 NEW FRONTIER TREATMENT CENTER	1
		Clark	100535029 COMMUNITY COUNSELING CENTER	1
			100535030 HELP OF SOUTHERN NEVADA	1
			100535031 HELP OF SOUTHERN NEVADA	1
			100535035 VITALITY UNLIMITED	1
			100535042 LAS VEGAS INDIAN CENTER INC	1
			100535044 BRIDGE COUNSELING ASSOCIATES	1
			100535047 WESTCARE NEVADA INC	1
			100535050 WESTCARE NEVADA INC	1
			100535052 WESTCARE NEVADA INC	1
			100537954 SOLUTIONS RECOVERY INC	1
		Douglas	100535380 TAHOE YOUTH AND FAMILY SERVICES	1
		Elko	100535033 VITALITY UNLIMITED	1
		Humboldt	100535045 VITALITY UNLIMITED	1
		Lyon	100535032 RURAL NEVADA COUNSELING	1
		Nye	100535049 WESTCARE NEVADA INC	1
		Washoe	100535020 BRISTLECONE FAMILY RESOURCES	1
			100535034 VITALITY UNLIMITED	1
			100535038 QUEST COUNSELING AND CONSULTING	1
			100535039 TAHOE YOUTH AND FAMILY SERVICES	1
			100535041 FAMILY COUNSELING SERVICE OF NORTHERN NV	1
			100535043 RIDGE HOUSE INC	1
			100535046 STEP 2 INC	1
			100535048 WESTCARE NEVADA INC	1
			100535452 STEP 1 INC	1
			Total	26

Providers Enrolled is the unique count of providers who are enrolled to provide services under the plan. This includes all providers authorized to provide services even if they have not provided services to any patients.

The DHCFP data warehouse is comprised of claims data submitted by over 21,000 Medicaid providers from within Nevada and across the country. While DHCFP staff conscientiously make their best efforts to validate this data through continuous provider education and the use of a highly experienced audit staff, the Division heavily relies on its providers to submit accurate and complete information on our Medicaid patients. It should therefore be understood by the users of DHCFP reports on disease morbidity and patient health that the data source for these reports is based solely on patient claims data and may not be a complete and comprehensive health record.

Substance Abuse Agency Model (SAAM) Fee for Service Reports

Time Period: Incurred With Runoff Quarter			QTR 3 2014
			Providers
Provider Type Claim NV Code	Provider Specialty Claim NV Code	Provider ID and Name	
017	215	100535020 BRISTLECONE FAMILY RESOURCES	1
		100535028 CARSON CITY COMMUNITY COUNSELING CENTER	1
		100535029 COMMUNITY COUNSELING CENTER	1
		100535030 HELP OF SOUTHERN NEVADA	1
		100535032 RURAL NEVADA COUNSELING	1
		100535033 VITALITY UNLIMITED	1
		100535036 NEW FRONTIER TREATMENT CENTER	1
		100535038 QUEST COUNSELING AND CONSULTING	1
		100535041 FAMILY COUNSELING SERVICE OF NORTHERN NV	1
		100535043 RIDGE HOUSE INC	1
		100535044 BRIDGE COUNSELING ASSOCIATES	1
		100535049 WESTCARE NEVADA INC	1
		100535050 WESTCARE NEVADA INC	1
		100535380 TAHOE YOUTH AND FAMILY SERVICES	1
		100535452 STEP 1 INC	1
		Total	15

Providers is the unique count of providers who performed any facility, professional, or pharmacy services.

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Time Period: Incurred With Runoff Quarter		QTR 3 2014			
		Claims Paid	Claims % Paid	Claims Denied	Claims % Denied
Provider Type Claim NV Code	Provider Specialty Claim NV Code				
017	215	5,084	80.97%	1,195	19.03%

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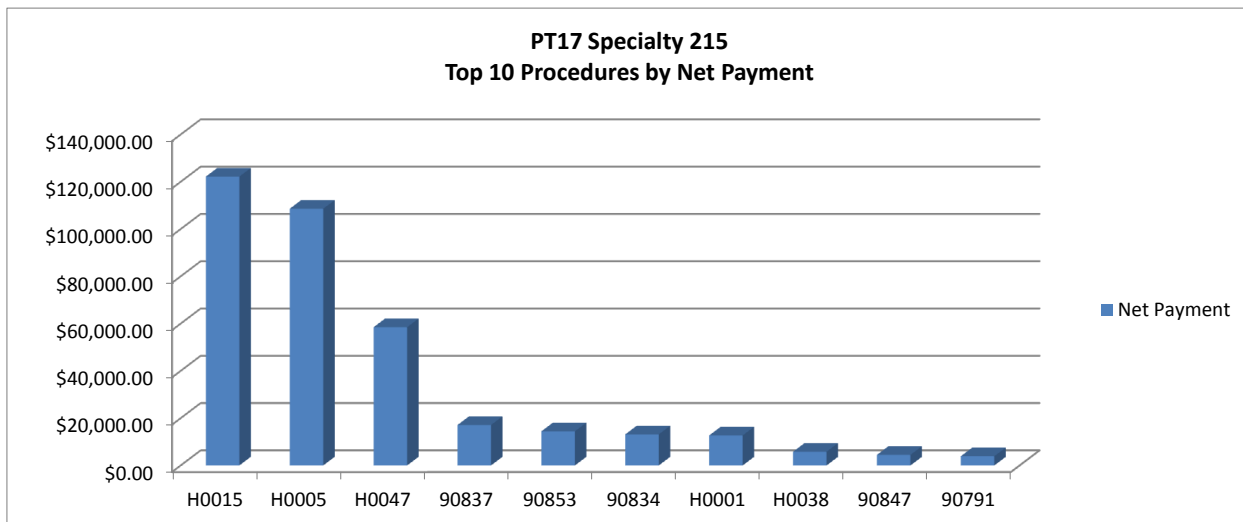
Time Period: Incurred With Runoff Quarter			QTR 3 2014
			Claims Denied
Provider Type Claim NV Code	Provider Specialty Claim NV Code	Edit Error 1	
017	215	Procedure Requires Authorizati	183
		Unknown Edit Err1 0091	179
		Recipient Not on File	136
		Duplicate of History File Reco	114
		Same Procedure Same Day Diff	109
		NUMBER OF PROCEDURES EXCEEDS N	79
		Service Center Not Authorized	77
		BILL ANY OTHER AVAILABLE INSUR	76
		PROCEDURE MODIFIER DISAGREES W	76
		Duplicate Payment Request - Sa	55
		ENROLLED IN HMO	44
		CURR PROC. DUPL TO HIST(MAX AL	31
		Unknown Edit Err1 1104	7
		Unknown Edit Err1 4720	6
		ALLOWED AMOUNT > THRESHOLD	4
		Recipient Not Eligible on DOS	4
		MEDICARE REMITTANCE (EOMB) NOT	3
		QMB ONLY RECIPIENT - BILL MEDI	3
		BILLING PROVIDER IS NOT A GROU	2
		PROVIDER NOT APPROVED FOR ELEC	2
		AUTHORIZATION NOT VALID FOR DO	1
		DENIED CLM REPROCESSED	1
		INVALID PROCEDURE/MODIFIER COM	1
		INVALID THIRD DIAGNOSIS	1
		Unknown Edit Err1 0916	1
		Total	1,195

Edit Error 1 is the description for the edit error (claim denial reason) in the primary position. A single claim can have up to 30 different edit error codes. Error description may be incomplete due to limited character space in the reporting database.

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Time Period: Incurred With Runoff Quarter				QTR 3 2014		
				Patients	Service Count Paid	Net Payment
Provider Type Claim NV Code	Provider Specialty Claim NV Code	Procedure Code	Procedure			
017	215	H0015	Alcohol/drug svc-intensive outpatient program	70	870	\$122,190.60
		H0005	Alcohol/drug services-group counsel by clinician	237	3,638	\$108,594.25
		H0047	Alcohol/drug abuse svc not otherwise specified	215	1,015	\$58,479.12
		90837	PSYCHOTHERAPY PATIENT &/ FAMILY 60 MINUTES	39	162	\$17,104.55
		90853	GROUP PSYCHOTHERAPY	41	509	\$14,434.74
		90834	PSYCHOTHERAPY PATIENT &/ FAMILY 45 MINUTES	48	182	\$13,142.98
		H0001	Alcohol and/or drug assessment	91	91	\$12,690.86
		H0038	Self-help/peer services per 15 minutes	12	906	\$5,791.08
		90847	FAMILY PSYCHOTHERAPY W/PATIENT PRESENT	14	48	\$4,465.20
		90791	PSYCHIATRIC DIAGNOSTIC EVALUATION	28	28	\$3,904.88
		H0002	Behav health screen-eligibility for Tx program	59	59	\$1,815.36
		99213	OFFICE OUTPATIENT VISIT 15 MINUTES	16	22	\$968.00
		90833	PSYCHOTHERAPY PT&/FAMILY W/E&M SRVCS 30 MIN	16	23	\$875.38
		H0049	Alcohol &/or drug screening	71	72	\$702.00
		90792	PSYCHIATRIC DIAGNOSTIC EVAL W/MEDICAL SERVICES	6	6	\$665.50
		90839	PSYCHOTHERAPY FOR CRISIS INITIAL 60 MINUTES	3	3	\$337.65
		90840	PSYCHOTHERAPY FOR CRISIS EACH ADDL 30 MINUTES	1	1	\$56.27
		H0007	Alcohol/drug services-crisis intervention-outpt	2	2	\$43.42
		90785	PSYCHOTHERAPY COMPLEX INTERACTIVE	1	4	\$17.60
			Total	970	7,641	\$366,279.44



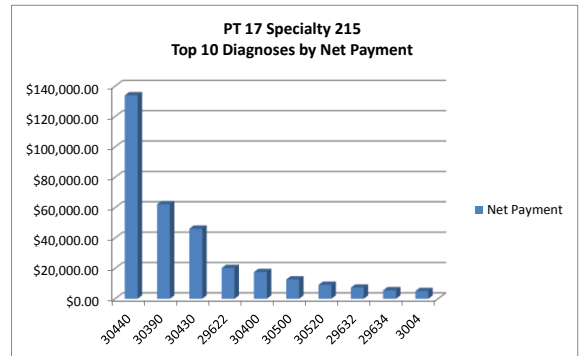
Net Payment is the net amount paid for all claims. It represents the amount after all pricing guidelines have been applied, and all third party, copayment, coinsurance, and deductible amounts have been subtracted.

Total Patient Count is not unique (i.e. patient counts may be duplicated across procedure codes).

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Time Period: Incurred With Runoff Quarter				QTR 3 2014		
				Patients	Service Count Paid	Net Payment
Provider Type Claim NV Code	Provider Specialty Claim NV Code	Diagnosis Code Principal	Diagnosis Principal			
017	215	30440	Amphetamine & psychostimulant dependence NOS	164	2,479	\$133,921.99
		30390	Alcohol dependence NEC & NOS, unspecified	113	1,620	\$62,244.99
		30430	Cannabis dependence NOS	64	882	\$46,106.06
		29622	Major depressive disorder, single episode, mod	7	644	\$20,206.08
		30400	Opioid type dependence NOS	41	385	\$17,530.84
		30500	Alcohol abuse NOS	31	187	\$12,692.45
		30520	Cannabis abuse NOS	26	167	\$9,147.48
		29632	Major depressive disorder, recurrent, moderate	5	229	\$7,295.58
		29634	Major depressive disorder, recur, severe w psych	3	89	\$5,555.53
		3004	Dysthymic disorder	8	126	\$5,088.61
		31381	Oppositional defiant disorder	2	125	\$4,978.92
		30981	Posttraumatic stress disorder	15	45	\$3,849.63
		29633	Major depressive disorder, recurrent, severe	3	68	\$3,578.20
		30480	Combination drug dependence excl opioid NOS	4	78	\$3,507.46
		30570	Amphetamine & sympathomimetic abuse NOS	11	65	\$2,881.54
		31234	Intermittent explosive disorder	2	87	\$2,596.95
		30420	Cocaine dependence NOS	6	33	\$2,476.73
		29570	Schizoaffective disorder NOS	5	25	\$2,233.59
		311	Depressive disorder NEC	5	22	\$2,154.24
		30002	Generalized anxiety disorder	3	20	\$1,731.57
		30490	Drug dependence NOS, unspecified	2	28	\$1,609.01
		29600	Bipolar I disorder, single manic episode NOS	1	19	\$1,500.20
		30410	Sedative/hypnotic/anxiolytic dependence NOS	2	29	\$1,340.94
		3094	Adjustment dis w mixed disturb emotion & conduct	2	12	\$1,151.96
		29689	Bipolar disorder NEC	2	11	\$1,119.56
		30550	Opioid abuse NOS	4	21	\$1,005.38
		30928	Adjustment dis w mixed anxiety & depressed mood	4	15	\$998.42
		29630	Major depressive disorder, recurrent NOS	2	13	\$886.26
		V7109	Observation suspected mental condition NEC	9	13	\$684.04
		3099	Adjustment reaction NOS	1	6	\$648.90
		30460	Drug dependence NEC NOS	1	18	\$625.44
		29653	Bipolar I, recent depressed, sev w/o psych behav	2	22	\$602.54
		29650	Bipolar I, most recent episode depressed NOS	1	9	\$599.50
		7999	Unknown cause morbidity/mortality NEC	4	5	\$457.98
		3093	Adjustment disorder w conduct disturbance	1	8	\$450.20
		29680	Bipolar disorder NOS	4	6	\$425.44
		29624	Major depress disord, snl epis, severe w psych	1	3	\$421.35
		30560	Cocaine abuse NOS	1	7	\$383.17
		29530	Paranoid schizophrenia NOS	1	2	\$280.90
		30023	Social phobia	1	2	\$247.61
		30924	Adjustment disorder w anxiety	1	2	\$247.61
		29651	Bipolar I, most recent episode depressed, mild	1	4	\$175.26
		30021	Agoraphobia w panic disorder	1	2	\$170.33
		3090	Adjustment disorder w depressed mood	1	1	\$139.46
		31230	Impulse control disorder NOS	1	3	\$117.48
		29590	Unspecified schizophrenia NOS	1	1	\$113.76
		30441	Amphetamine & psychostimulant dependence, cont	1	1	\$57.78
		30000	Anxiety state NOS	1	1	\$30.77
		3009	Nonpsychotic mental disorder NOS	1	1	\$9.75
			Total	573	7,641	\$366,279.44



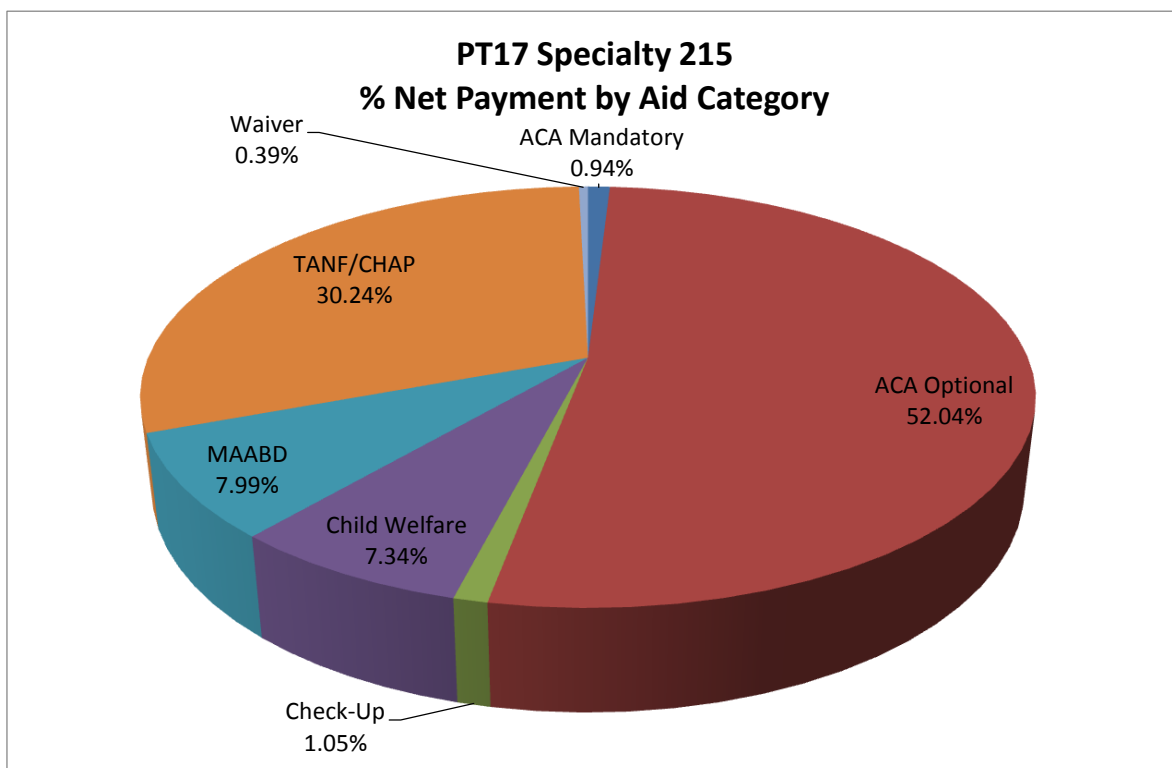
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			Patients	Service Count Paid	Net Payment
Provider Type Claim NV Code	Provider Specialty Claim NV Code	Category			
017	215	ACA Mandatory	2	83	\$3,460.68
		ACA Optional	286	4,288	\$190,608.33
		Check-Up	4	95	\$3,832.52
		Child Welfare	23	723	\$26,897.10
		MAABD	72	440	\$29,277.26
		TANF/CHAP	157	1,964	\$110,770.75
		Waiver	1	48	\$1,432.80
		Total	545	7,641	\$366,279.44



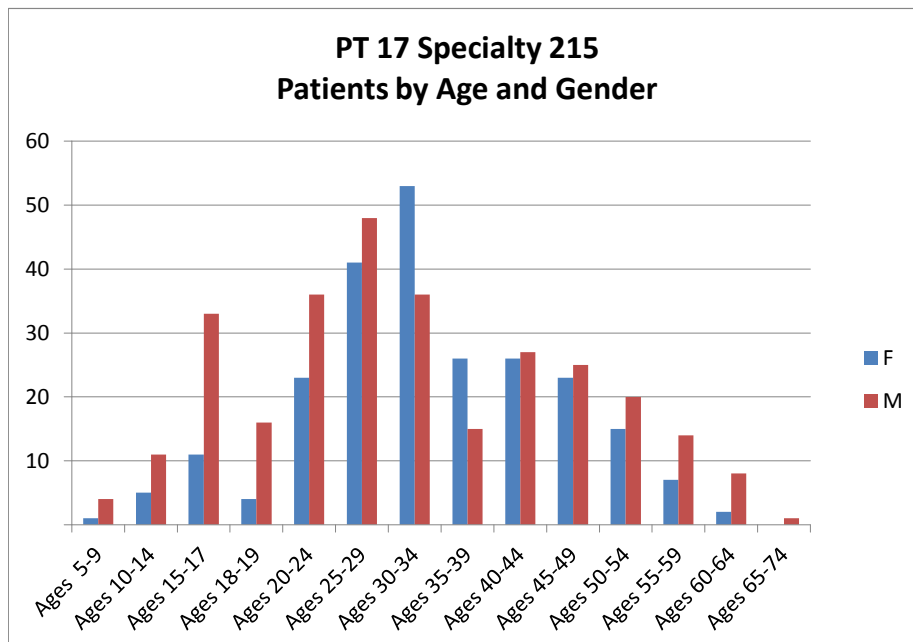
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Time Period: Incurred With Runoff Quarter			QTR 3 2014	
			Patients	
			F	M
Gender Code				
Provider Type Claim NV Code	Provider Specialty Claim NV Code	Age Group Medstat		
017	215	Ages 5-9	1	4
		Ages 10-14	5	11
		Ages 15-17	11	33
		Ages 18-19	4	16
		Ages 20-24	23	36
		Ages 25-29	41	48
		Ages 30-34	53	36
		Ages 35-39	26	15
		Ages 40-44	26	27
		Ages 45-49	23	25
		Ages 50-54	15	20
		Ages 55-59	7	14
		Ages 60-64	2	8
		Ages 65-74	0	1
		Total	237	294



Note: there is a small amount of Patients that change age during the quarter and fall into more than one age group.

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